

The Seventh Judicial District Court of the State of Idaho for Teton County

PLEASE NOTE NAME OR ADDRESS CHANGES BELOW:

FIRST NAME	MIDDLE NAME	LASTNAME
MAILING ADDRESS		
СПҮ	STATE	ZIP

Welcome to jury service. You are about to participate in our judicial process by serving as an on-call juror in Teton County Seventh Judicial District Court. Your participation is vital in helping to ensure that the constitutional right to a trial by jury will guarantee the protection of life, liberty and property.

Important features of the jury service program of Teton County:

- 1. The juror questionnaire on the other side of this form will be used to qualify you as a potential juror. This means that you will be "on-call" for a period of 6 months. There may be several jury trials during those 6 months or there may be none. If you are called to serve for a particular jury, you will receive written notification prior to that trial. We will try to notify you as early as possible but generally you will only receive 10-14 days notice.
- 2. If there are legal reasons why you should be disqualified, those reasons should be noted on the Juror Questionnaire. Please answer all questions as accurately and completely as possible. There are penalties for lying on a jury qualification form.
- 3. If you are filling out this form for someone else because they have moved, are away at college, serving a mission, in the armed service, etc., please complete the section below and return it to us. We must have these forms returned. A phone call is not sufficient for us to excuse a person from jury service. We must have something in writing and signed in order for us to consider excusing someone.

We hope that you will find your jury service to be an interesting and rewarding experience.

JUROR QUESTIONNAIRE IS ON BACK OF THIS PAGE. PLEASE COMPLETE AND RETURN WITHIN 10 DAYS. .

THIS SECTION TO BE COMPLETED JUROR QUESTIONNAIRE FOR THE	AND SIGNED ONLY IF ANOTHER PERSON COMPLETES THE PROSPECTIVE JUROR.
I, behalf of the above-named prospective jure	hereby declare that I filled out the juror questionnaire form for and on or for the following reasons.
Signature	Relationship

JUROR QUESTIONNAIRE PLEASE ANSWER ALL QUESTIONS AND RETURN WITHIN 10 DAYS

IF NAME OR ADDRESS IS INCORRECT, PLEASE MAKE CHANGES ON FRONT OF FORM

Name		Date o	f Birth	/ /	Age	Sex (M/F)
Telephone: Home	Cell		. 7	Work		_ = ===================================
Telephone: Home Marital Status: Divorced	Married S	Separated	Single	Widowe	d	
Number of Children A Your Employer Your Years of Education (Num Spouse's Employer	ges of Children					-
Your Employer		Yоиг Осса	pation			 ,
Your Years of Education (Num	ber) Name (of Spouse	* ,			
140 Itave you of a	ary memoer of your imi	nediate family ev	er been a ba	rty to a laweni	t?	
If yes, type of lawsuit						
Where Yes No Have you or a				When		
Yes No Have you or a	any member of your im:	mediate family e	ver been inve	olved in a bod	ly injury	lawsuit?
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a nattic violation? If yes, type	of criminal action				,	
AA HELE				(37L		
Yes No Are you rel	ated to, or a close friend	d of, any law enfo	orcement off	icer? If yes, p	rovide na	me(s) below
Yes No Have you prev	viously served as a juro	r? If yes, Where			V	Vhen
Tes No Do you drive	an automobile?					
MILEAGE ONE WAY TO CO	OURTHOUSE FROM	YOUR HOME				
-						
LEGAL DISCHAI IFICATIO	NG DIEAGE CITECT	C ITT mmrim				
LEGAL DISQUALIFICATIO I am NOT a citizen of the	NO - PLEASE CHECK	ALL THAT AP	PLY:			<u> </u>
(Must show proof of non-citizent	Omicu States Of Ami	enca.		_		·,
		signed letter or a	copy of you	r green card.		
I am NOT a resident of Te	ton County					
(Must show proof of non-res	idency) Please enclose a	copy of your Dri	vers License	or Voter Regis	tration	
I am NOT able to read, sp	eak and understand th	he English lang	lage.			
☐ I HAVE BEEN convicted of		•	=			
and my voting rights have n	ot been restored		Count	y, State of	4	
*						
Within the past five (5) ye	ars, I have served or a	ttended court as	a juror in tl	he Seventh D	istrict Co	ourt of
Teton County. When						
☐ IAM seventy (70) years of a	ige or older and wish to	be excused.				
Request for Medical Exemp	non: The State of Ida	the does not reco	gnize any	MEDICAL EX	(CUSE f	rom jury service
except for severe medical pro this questionnaire.	TOTELLS WHICH MOST B	E SOPPORTED	BY A DOC	TOR'S CERT	TICATE	i, submitted with
questionanto.						
THE RESPONSES TO THE QUANTE	DESTIONS ON THIS	OHATIFICATE	ON EODM	ADE TOTO	TA TITE	DECEMBED A SEC
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N THE COUNTY JAIL FOR NO	JI MORE THAN TEN	(10) DAYS OR	BOTH.	, , , -	•	
IGN HERE				אינות 1 על		es.
				DATE		
eturu completed questionne	iima					1.

Return completed questionnaire within 10 days to:

Teton County Court 150 Courthouse Dr #307 Driggs, ID 83422